

Southern Ohio Lunatic Asylum  
(Dayton Mental Health Center)  
2335 Wayne Avenue  
Dayton  
Montgomery County  
Ohio

HABS NO. OH-2222

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OH,  
57-DAYT,  
5-

PHOTOGRAPHS

WRITTEN HISTORICAL AND DESCRIPTIVE DATA

HISTORIC AMERICAN BUILDINGS SURVEY  
MID-ATLANTIC REGION NATIONAL PARK SERVICE  
DEPARTMENT OF THE INTERIOR  
PHILADELPHIA, PENNSYLVANIA 19106

HABS  
OHIO  
33-DAYT  
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# HISTORIC AMERICAN BUILDINGS SURVEY

## SOUTHERN OHIO LUNATIC ASYLUM

HABS No. OH-2222

(Dayton Mental Health Center)

**LOCATION:** 2335 Wayne Avenue (aka 10 Wilmington Avenue)  
Dayton, Montgomery County, Ohio

**PRESENT OWNER:** WILMINGTON WOODS LTD I  
Barry K. Humphries, General Partner  
929 Harrison Avenue  
Columbus, Ohio 43215

**PRESENT OCCUPANT:** Vacant since 1978.

**PRESENT USE:** Formerly owned and operated by the Ohio Department of Mental Health from date of erection (1855) until being vacated in 1978.

**SIGNIFICANCE:** State of Ohio second major institution for the insane. Plans for the building were based on the first uniform plan of hospital construction, developed by Dr. Thomas Kirkbride of Philadelphia, a knowledgeable expert on asylum architecture who had traveled throughout England. He studied the defects of the European model and devised plans, formulated in a series of 26 presentations, which were formally adopted by the Association of Superintendents of Institutions. This building layout became a prototype for most of the mental hospitals built in the 1800's.

The Kirkbride plan consisted of an administration building, to be used for offices, store-rooms and kitchen, as well as a residence for the superintendent and medical officers. On either side of the administration building are wings, each to be segregated by sex. The wings terminate in cross sections which gave accommodations to water closets, clothing rooms and bath rooms, while at right angles from the cross sections are other wings. This design could be extended indefinitely.

SIGNIFICANCE: (CONTINUED)

In some instances four sets of longitudinal wings and cross sections were arranged for the care of different classes of patients. The theory was that convalescents and quiet patients would occupy the wards close to the administration building. Patients in an intermediate state would occupy the wards nearest the convalescent ward and patients who suffered more severe excitement or were especially objectionable by reason of noisy outcries or turbulent conduct were placed as far away from other patients and from the administrative building as possible. A more recent administrator of the institution, however, describes the design as functioning to minimize the dangers inherent in mass movement of patients to common areas, containing movement basically within the wards rather than using routes outside the ward areas. Each ward was complete in itself. By means of miniature railways with provision cars and a series of dumb waiters, it was possible to supply food from a central kitchen adjacent to the administration building to the individual ward dining rooms. Large common dining rooms were later added to each wing and the ward dining areas converted to bedrooms.

As a result of the Dayton building, similar institutions were constructed in almost every state in the union. Introduction of this innovative design and many other subsequent improvements to the theory of mental health care environment, put into practice by Southern Ohio Lunatic Asylum superintendents, placed the Dayton institution at the forefront of asylum care in the United States for many years.

The elaborate Victorian structure was a great source of community pride. It was an excellent example of a self-contained community with its own gas, electric and water facilities, off-site working farm, on-site cannery, employee housing facilities, livestock facilities and main line railroad tracks.

The site of the building is one of the most beautiful in Ohio and overlooks the City of Dayton and the entire Miami Valley Area. The Dayton State Hospital was at one time an accredited training center for student nurses.

PART I. HISTORICAL INFORMATION

A. PHYSICAL HISTORY

- 1) Date of Erection: 1855

- 2) Architects:

Samuel Sloan of Philadelphia, PA (based on the Kirkbride design) Phase I.

James W. McLaughlin of Cincinnati, Ohio (Phase II Wing extensions, Roof Modification and Dome Additions).

Peters & Burns Architects (Phase III Dining Room Additions to Wings).

- 3) Original and subsequent owners:

Ohio Department of Mental Health (1855 - 1982); Dayton Miami Valley AFL-CIO (1982 - 1984); Wilmington Woods Ltd I (1984 - present)

- 4) Contractors:

Daniel Richmond and Company (Phase I) at a base contract cost of \$67,350.50. Total cost including architect's fees, Superintendent of work, additional work on building and fence, necessary outbuildings, expenses and fees of Trustees and equipment was \$132,751.25.

Dennis Ensey of Dayton, Ohio (Phase II) total cost \$290,000.

- 5) Original Plans and Construction:

Planning commenced in approximately July of 1852 and construction was completed in September of 1855. The initial land parcel consisted of 50 donated acres. Original capacity was 100 patients. The first patients were transferred to the building from the white building across Wilmington Avenue. Total admission in the first 2 1/2 months was 70 with 11 releases bringing the total number of residents at the time of the Superintendents first report to the Board of Trustees to 59.

In Phase I the main building consisted of a rectangular four story central administrative block with two three story gabled symmetrical wings.

6) Alterations and Additions:

Reference materials present conflicting dates and details on subsequent alterations and additions.

In 1862 there were 24 more acres of land purchased for \$3,750 and by 1865 the number of patients had reached 171. Reports indicate that in 1866 additions were constructed behind the central block, however, architectural plans approved by the Board of Trustees in this year for wing extensions do not reflect these additions.

Onto the original 1855 wings, set back, overlapped and extended additions were commenced in approximately 1867 (Phase II) that are constructed in the style of the earlier wings. The wing extensions were occupied in 1869 costing a total of \$290,000 and gave the main building an overall front facade length of 800 feet.

In 1872 the facility housed 609 patients. By November 15, 1878 the total cost of land and buildings was \$520,000 and the site consisted of 190 acres. The facility contained 10 female and 9 male wards and an excellent water supply. In 1881 telephones were installed in the buildings, a new gasworks was built at a cost of about \$10,000 and a water system costing \$5,000.

In 1891 drawings were completed for additions to the end of each wing (Phase III). These mirror image additions consisted of two large dining rooms on the first floor and dormitory, attendant room and patient dayroom on the second floor.

Between 1881 and 1905 six fire plugs were installed in the front of the building which, together with the seven plugs at the rear of the building (installation date not available), it was possible to throw two (2) 1" streams of water over any part of the building at one time. A new lake was made and a deer park constructed on the site of a former hog lot, making three ponds on the grounds to be used in case of fire. The water supply was furnished from wells dug about a mile from the building.

The period from 1866 to 1922 produced numerous additions to the facility in terms of both main building additions and outbuildings. Because of the conflicting resource dates we find it difficult to report them with any confidence of accuracy. During this period it appears that the administrative building received three additions. The first addition extended the corridor of the original rectangle and two subsequent additions provided kitchen and employee cafeteria facilities on the first floor and employee rooms on the second floors.

6) Alterations and Additions: (Continued)

Historical reports indicate that in 1866 a kitchen was built and a rear corridor rebuilt, however we doubt that this refers to the addition. In 1881 reference is made to contemplated improvements, "...which in the near future will be finished.", described as "... an addition on the rear of the main building (area unstated), which will give eighteen additional rooms for employees of whom there are 97, and six rooms to the administration buildings, besides giving a chapel back of the amusement hall (location unknown) increasing by one-fourth the size of the latter." We cannot determine if anticipated plans were executed as stated above, however, this may account for the first addition to the administrative core. It is the subsequent two additions that are scheduled for demolition.

Throughout the years the original uses for many areas and buildings have been lost. There were many kitchens and many areas and buildings that changed useage over time.

In 1871 drawings were produced for the mansard modifications to the roof and the addition of side domes at each wing and a central dome. The dome at the center of the building was covered with solid copper sheeting, approximately 20 feet in diameter and primarily beaux-arts in style with classical pilasters, pediments and bull's eye windows. (The central dome collapsed during an arson fire that damaged the central section of the building in July of 1983.) Ornamentation to the building's cornice and windows and a large white portico supported by Ionic columns on the front center section were also added. The dates that these alterations were executed is not known. Facade changes were likely implemented in stages between 1871 and 1905 as funds permitted.

The building construction is of 18" thick brick walls on a limestone foundation. The bricks are of the low-fired, semi-porous type used in the 19th Century. For years the building was painted to seal it from moisture. In 1960-1961 the hospital director, Mahmud Faruki, had the exterior brick cleaned, mortar joints re-tucked, trim, gutter and downspouts repainted, new terrazzo floors installed in Wards 11 and 12, and the two open stairways restored, new power lines run to the basement and kitchen area. Part of the building was re-roofed.

In 1970 extensive work was performed on the windows and new interior stairs were built.

B. Historical Context:

In 1851, the Ohio Lunatic Asylum in Columbus was the only one in the state, with a capacity of only three hundred patients. Because the estimate of the insane in that year was placed closer to two thousand, the proposal for an additional asylum was made. Plans began in 1852 when an act was passed by the Ohio Legislature and \$140,000 were appropriated by the Legislature for the building of two additional "Lunatic Asylums" in the State of Ohio. On July 7, 1852, the board met in Cincinnati and on July 8, 1852, in Dayton and decided to locate in Dayton. The required fifty acres of land had been donated and on September 6, 1852, the County Commissioners appropriated \$500 toward paying for the land, the balance of the purchase being requested to be donated by the citizens. Finished in September, 1855, the entire cost came to about \$110,000 including architect's fees and superintendents.

Joshua Clements was the first superintendent, serving under Governor Reuben Wood while Franklin Pierce was President of the United States. The institution opened under the name of "Southern Ohio Lunatic Asylum". In 1855 Mr. Clements' first Steward's Report to the Board of Trustees advised that, in the two and one half months of occupancy a total of 70 patients had taken residency. During that period 11 patients were discharged or removed. Of the remaining 59 patients, 52.5% were between the ages of 20 and 35 years of age with distribution of males and females being almost equal, over 50% of the men being single and over 50% of the females being married or widowed. The predominant form of insanity was defined as "mania acute". Of the supposed causes, 27 of the 59 were categorized as "unknown". Although the institution was to serve the 13 west central counties with a uniform per county quota, 57.6% of the original patients were from Hamilton County, a result of the over-crowded conditions of the Hamilton County Asylum. (Two years later Hamilton County would be declared a separate district to itself.) Of the 59, 27% were born in Germany, 25% in Ohio and 13.6% in Ireland. Predominant male occupation for this group was laborer or farmer, for women patients 34.4% were housekeepers and 24% had no occupation. In his report Clements advises the Board of Trustees that they have only 8 iron beds. He also stressed, among other things, the need to grade and beautify the grounds stating that outdoor exercise and amusement are valuable curative agents. He lists, also, the need to provide an adequate library, noting that this is an "important appendage to all hospitals for the insane" and that "all kinds of miscellaneous reading matter is eagerly sought after by the inmates." The hospital met Mr. Clements' goal, the grounds becoming some of the most beautiful in the area with varieties of pine now almost extinct and a well stocked library containing many rare books. Clements' requested appropriation for 1856 was

B. Historical Context: (Continued)

\$21,534.00, to which he notes "The liberality of the people is shown by their attention to benevolent institutions and it is for them to make them what they should be and what they are capable of being - the pride and ornament of Ohio."

On October 8, 1858, the roof of the southwest wing blew off in a windstorm and in 1860 a severe storm blew off 40 squares of roofing. Over the years the property was beset by wind damage, a factor of its elevated site, and reports indicated extensive portions of the roof were lost 6 times in 13 years.

From 1862 to 1872 Dr. Richard Gundy served as Superintendent and is credited with effecting much of the physical expansion and bringing the institution to its high standard among those of the Union as one of the foremost asylums in the land.

In 1873 small-pox broke out in the asylum and a large brick house, known as the Dr. William Egry property, was secured for a pest-house. By 1880 the daily average of patients was 594.

In 1875 the name was changed to "Western Ohio Hospital For The Insane" and in 1894 it became the "Dayton State Hospital For The Insane". In 1970 it was renamed the "Dayton Mental Health Center".

Between 1881 and 1905 several additions were made to the facility. By 1894 it was part of a self-contained community with its own power plant and water tower. The hospital had a working farm where a variety of vegetables and grains were produced in addition to cattle and poultry. The farm produced adequate food to provide for the needs of the SOLA facility and ship the surplus to other state institutions. The farm is in what is now east Kettering and was purchased from the Shaker community in 1909. The farm was tended by mental patients many of which lived permanently on that site. A canning factory on the hospital site was operated by the patients as well (demolished in 1978). Any type of work in the hospital, grounds or farm a patient was capable of performing was thought to be of therapeutic value.

On May 6, 1902, the board authorized conveyance by deed of a strip of land 75 ft. wide to the Dayton, Lebanon and Cincinnati Railway for the main line tracks onto the grounds.



B. Historical Context: (Continued)

By 1909 there were 595 women and 604 men registered as patients with 84 attendants and the superintendents as staff. The approximately 190 acres contained the main hospital structure and additional outbuildings consisting of three ward buildings, a power house, an electrical plant, a new horse and dairy barn, a laundry, an infirmary cottage, a convalescent cottage, a cottage for working men, two greenhouses and a list of other appurtenant structures too numerous to list, 62 in all, in addition to the main building. All of the outbuilding structures have since been demolished, including a two-story brick stagecoach stable built in 1845 (demolished in 1978).

In 1929 the Dayton State Hospital and grounds were brought into the City of Dayton corporation limits. There were 20 patient wards in the main building. In 1940 the State required that 125 feet of floor space be provided per patient, exclusive of dining rooms, serving rooms and kitchens. The current superintendent reported an overcrowding status of 38.5%. In 1951 the per capita cost per patient was \$4.60 per day — comparable to the weekly cost in 1860.

There are 13 cisterns around the building and the downspouts still drain into them. The water from these cisterns was used to wash hair and clothes for the inmates. Local reports indicate that in the early days of the institution a shrill whistle was blown to warn the neighboring residents that an inmate had escaped. We believe that the bell towers were originally designed to the same purpose, preceding the whistle. In the early 1900's a trolley car traveled to the institution from downtown Dayton at regular hours. It was marked "Insane Asylum". An old horse-drawn car marked "Wayne Ave. Hill Car - Asylum" was pulled up Wayne Ave. hill from Wyoming St. to the hospital. The usual myths and controversial issues still abound regarding the existence of a dungeon with iron chains and cages under the main building. Some say it was definitely there, some say it never existed. In light of the fact that these types of restraint were common practice in the 1800's it is likely that they did, in fact, exist but were eliminated as more progressive methods of treatment evolved and the use of sedatives employed to calm the more excited and violent patients. Floor plans indicate a number of seclusion rooms which were padded and contained only a low couch type structure. Some reports indicate that the bars on the windows which are iron, were originally made of hard wood. Barred windows seem to have been chiefly used on the wards most distant from the central building which would coincide with Dr. Kirkbride's architectural theory. In the early 1900's the hospitals list such things as constipation, hemorrhoids and excessive use of tobacco as perceived causes for mental illness and used such treatments as "laxatives" or "dumping water on a patient's head from a height of about four feet", the latter being a primitive form of shock therapy.

B. Historical Context: (Continued)

Upon touring the building in 1979, a local resident, Ruth R. Stasio, reports that "the basement was like a city in itself. There was a modern barber shop with 2 or 3 chairs and we also found the original barber shop with white tiled floor and 2 pedestal sinks. There was a print shop with the old equipment there, in place. There was a huge sewing room with sewing machines and bolts of fabric. The women patients hemmed sheets and draperies, etc." From a visit in 1967 she describes the interior furnishings of the main building, much of which she feels were donated through the generosity of the community, as "...beautiful antique furniture and oriental carpets and brass beds etc...The music room had 2 grand pianos - one was a concert grand. There were all kinds of instruments, horns, drums, probably all donated, that patients could use, for those musically inclined...There were rooms full of craft supplies." She stated that occupational therapy was "almost as important as pills or shock treatment." Many staff offices displayed patient art.

Mrs. Stasio describes the cottage buildings as reminiscent of lakeside vacation lodges with "large open living room and dining room, kitchen in the rear and single bedrooms upstairs around an open balcony" and were inhabited by the "not so sick" patients. She also adds that the patients were not all mentally ill but rather some were just senile (today's rest home patients) and mentally retarded (today's group home residents).

Decentralization took place in the late 1960's and the men's and women's wards were mixed. Mrs. Stasio, who's daughter was a nurse at the facility, reported that patients ranged in age from 18 to 80, from all socio-economic classes (Ohio's asylums were established to serve all those in need at the total financial support of the taxpayers) and "all were encouraged to interact". This is a dramatic change from the philosophy of the Ohio Legislators in 1831 when they passed a resolution on March 1 appointing a Commission to visit the Cincinnati institution and inquire and report, among other things, "whether the cells and apartments of the lunatic asylum are sufficiently separated from each other by thick walls to prevent the inmates from communicating with each other...". Their method was based on total isolation.

Although we have been unable to determine how the residents of the immediate area related to the facility when it was in use, we do know that the residents of Dayton have displayed a great interest and effort to save the the main facility from demolition and are in favor of restoration and renovation efforts. A number of large homes were built in the immediate area in the early 1900's which implies that the institution did not affect the desirability of the neighborhood.

B. Historical Context: (Continued)

The institution's more recent history has not been so positive. Starting in the 1960's, newspaper reports of the overcrowded hospital conditions and the poor treatment and negligence of patients were often heard. Staff cut-backs began, and by the early 1970's, the institution was quickly failing as a facility. In 10 years the number of patients dropped from 1,600 to an average of 380 patients. Treatment became more community based and sophisticated. A new facility was built on the grounds, and the main building of the Dayton Mental Health Center was vacated. It has remained empty since 1978.

PART II. ARCHITECTURAL INFORMATION

A. General Statement:

1. Architectural character:

Initially the style is said to have been influenced by the surrounding Watervliet Shaker Settlement in its simplicity of design and furnishings. Subsequent beaux-arts and Italian Baroque ornamentation earned it the descriptive style of "Victorian Italianate".

The area to be demolished is behind the central block, lesser in scale and detail. Joined to the central block, an extension corridor is appended by two axillary structures: the kitchen on the right and the staff lunchroom on the left. Both of these areas have low hip roofs, bracketted cornices, seven course brick bond, stone foundations and a majority of the windows are 6/6 double hung sash windows. The only difference occurs in the employee lunchroom, two of the exterior masonry corners are rounded.

2. Condition of fabric:

The kitchen/lunchroom area is collapsing upon itself. Masonry bearing exterior walls are separating and unit bricks are falling out. Interior wood floors are watersoaked and have buckled. The wing is structurally unsafe. No interior trim or hardware remains in the building.

B. Description of Exterior (Kitchen/Lunchroom Buildings):

1. Overall dimensions: 89'-0" X 83'-6"
2. Foundations: Stone
3. Walls: Seven course brick bond
4. Structural system, framing: built-up steel columns and beams on ground floor supporting wood joists and hardwood planks on upper floor.

B. Description of Exterior (Kitchen/Lunchroom Buildings): (Continued)

5. Chimney: Currently, a welded steel kitchen exhaust flue exists. No documentation or records exist to note if there ever were any masonry chimneys.
6. Openings: Majority of the windows are 6/6 double hung sash. Some of the kitchen area windows have been replaced with glass block.
7. Roof:
  - a) Low hip roofs with asphalt shingles
  - b) Bracketted cornices
  - c) No dormers, cupolas or eaves

C. Description of interior (Kitchen/Lunchroom Buildings):

1. Floor Plans:
  - a) Ground floor (first floor) consists of two (2) major wings: the kitchen wing and the employee dining wing (staff lunchroom) with a connecting corridor. The interior kitchen area is approximately two stories in height. The second floor lines up with the third level of the main administration wing to the north.
  - b) Second level contained sleeping rooms for evening doctors and nurses.
2. Stairways:

In the connecting corridor are wood. The stairs connecting the kitchen wing to the employee dining wing (see photo #14) are poured in place concrete with steel pipe handrails.
3. Flooring:

The flooring of the kitchen wing is 4"X 4" red quarry tile. The flooring in the employee/staff dining area is terrazzo. The upper floor is wood planks over wood joists.
4. Wall & Ceiling Finish:

Nearly all walls and ceilings are plaster, except for the kitchen area which apparently was remodeled at one time and a high-glazed block wainscot was installed.
5. Openings:
  - a) Doorways and doors: If there were any interior doors, they have been removed a long time ago. Existing openings have wood door frames.
  - b) Lighting: Surface mounted 8'-0" two tube fluorescent fixtures.

5. Openings: (Continued)

- c) Plumbing: Majority of piping and fixtures have been removed, but it was obvious that the system was not original.

D. Site:

1. General setting and orientation:

The site is bordered by Wilmington Avenue on the west and Wayne Avenue on the north. The central building and extending wings having central alignment with the intersection of the two avenues and, presenting a triangular effect, creates an impressive view from that intersection. The once elaborate guard houses and arbors (date of origin unknown but reflecting the style of the portico and dome additions) are situated adjacent to the intersection and introduce the large oval drive that leads to the central building entrance. They have deteriorated from weather and vandalism but are scheduled for reconstruction.

2. Historic landscape design:

The original grading of the grounds was completed in 1861 at a cost of nearly \$6,000 with most of the beautiful landscaping done by a German immigrant, Joseph B. Heiss, who earned national reputation as a grower of palms and eventually internationally reputed for his layouts of many parks around European palaces. Bordered by an iron fence, the property eventually developed into an impressive wooded site of ornamental and shade trees, flower beds sculpturing the lawns, two lakes with artificial cascades and miniature islands, a deer park and ponds. The grounds, like the buildings, were kept scrupulously neat and clean. The portion of the grounds containing the lakes and deer park remain the property of the State, adjoining the current Mental Health Center later added to the site, and are not a part of the redevelopment parcel.

3. Outbuildings:

The outbuildings (numbering approximately 62) mentioned in other portions of this text have been demolished over the years, the last being a canning factory and a two-story brick stage coach stable (c.1845), both demolished in 1978.

PART III. SOURCES OF INFORMATION:

- A. Original Architectural Drawings: None are known to exist.
- B. Early views: None are known to exist.

PART III. SOURCES OF INFORMATION: (CONTINUED)

C. Interviews:

Several meetings were held with current and former administrators of the former mental health facility to try and obtain any information in addition to the data already obtained from the Dayton and Ohio Historical and Preservation Offices.

D. Bibliography:

1. Primary and unpublished sources:

Many letter questionnaires were sent to relative mental health agencies, city, county and state preservation agencies and city and county development agencies as well as city/county and local university libraries. Photocopies were forwarded from various unidentified published and unpublished sources. Likewise, some information is from a report prepared by the Oregon Historic District Society, St. Anne's Hill Historic District Society and Oakwood Historical Society and used as a handout for a tour of the building to promote preservation of the site. They did not identify their sources.

First Annual Report of the Board of Trustees of the New Lunatic Asylums, and of the Officers of the Southern Ohio Asylum at Dayton. To the Governor of Ohio. For the Year 1855. pp. 4 thru 15.

Ruschau, Paul W., The Origin, Growth and Significance of the Dayton State Hospital: A Study In Courage and Foresight, paper 3/24/64 (University of Dayton)

Stasio, Mrs. Ruth R., Letter, February 1985.

2. Secondary and published sources:

Christensen, Kim, No More Asylum, Dayton Daily News, July 10, 1983.

McCaslin, Walt, Apartments? Why Not?, Dayton Daily News, late fall 1979.

History of Montgomery County, p.511,p.512,p.517 & p.518 (Author, publisher and date of publication unknown)

PART III. SOURCES OF INFORMATION: (CONTINUED)

E. Likely Sources Not Yet Investigated:

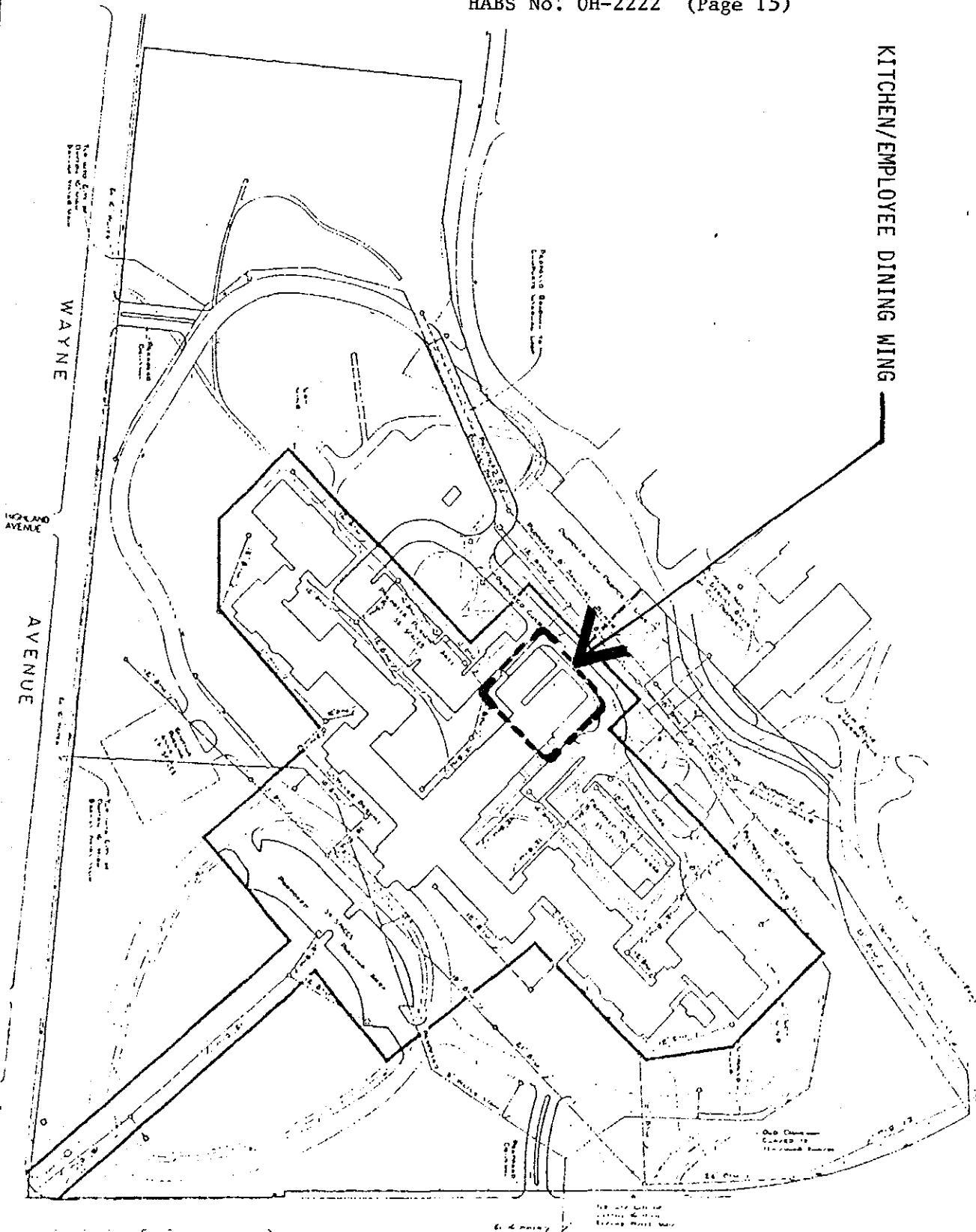
Most likely sources have been contacted.

PART IV. PROJECT INFORMATION

Demolition of the employee/staff lunchroom and kitchen wings of the Southern Ohio Lunatic Asylum are to be funded by the Department of Housing and Urban Development. Under Section 106 of the National Historic Preservation Act of 1966, mitigative documentation was undertaken by Antonio Colosimo, president of 3D/Group, Inc., Architects, in February 1985.

SOUTHERN OHIO LUNATIC ASYLUM (Dayton Mental Health Center)  
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KITCHEN/EMPLOYEE DINING WING



WILMINGTON

AVENUE

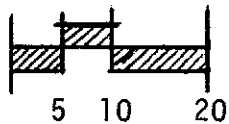
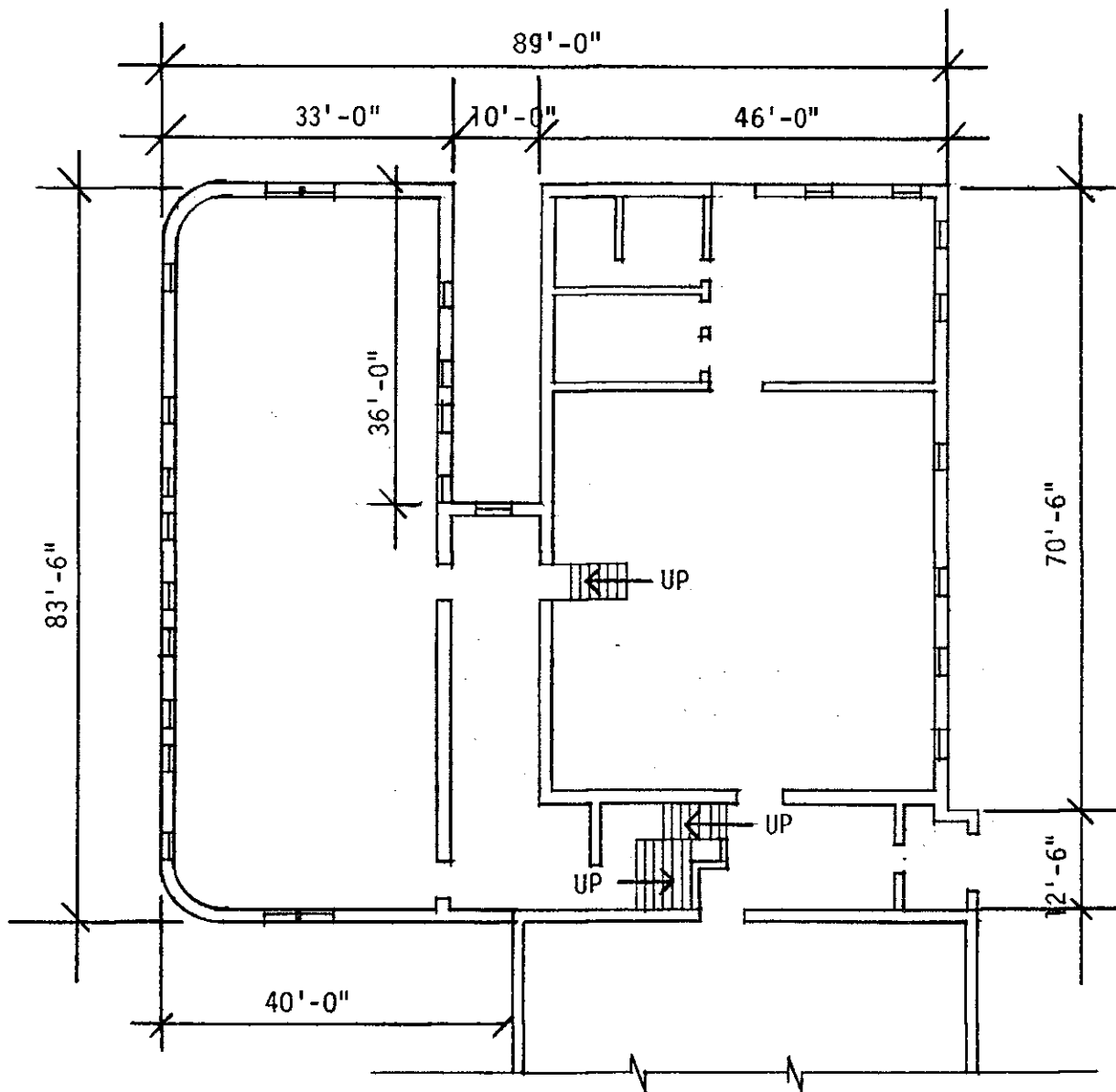
WOOLPERT CONSULTANTS  
2124 STANLEY AVENUE DAYTON, OHIO 45404

10 Wilmington Avenue, Dayton, Ohio

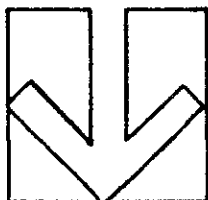
Architects: Engineers: Planners: Interiors: 33  
1221 Harrison Ave. 12  
Dayton, Ohio 45401  
601-1111



SOUTHERN OHIO LUNATIC ASYLUM (Dayton Mental  
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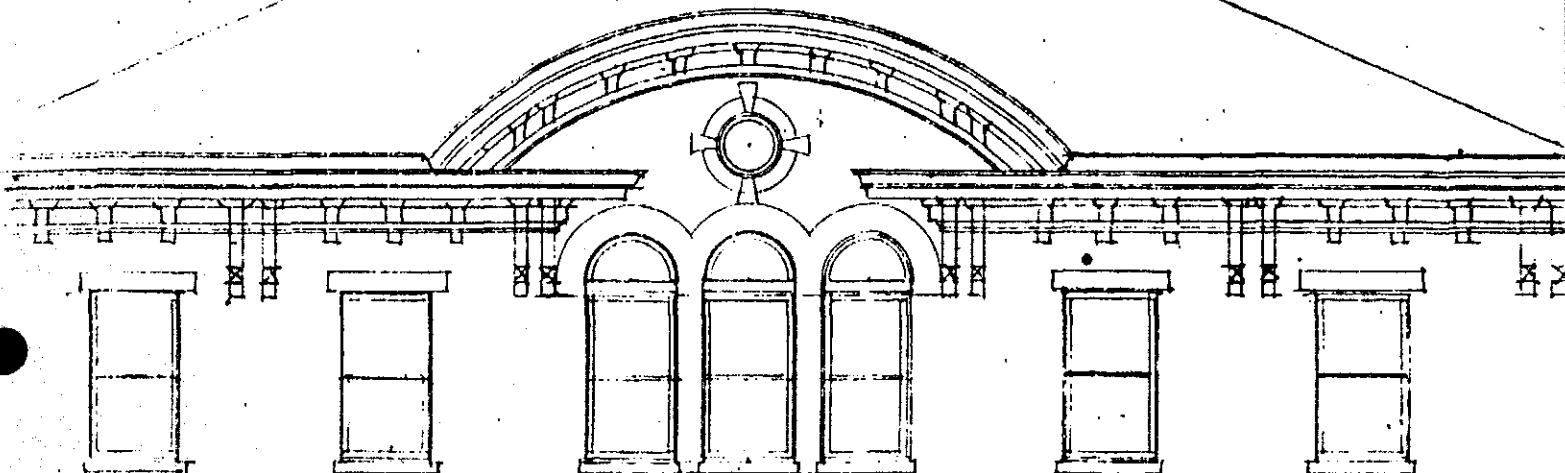
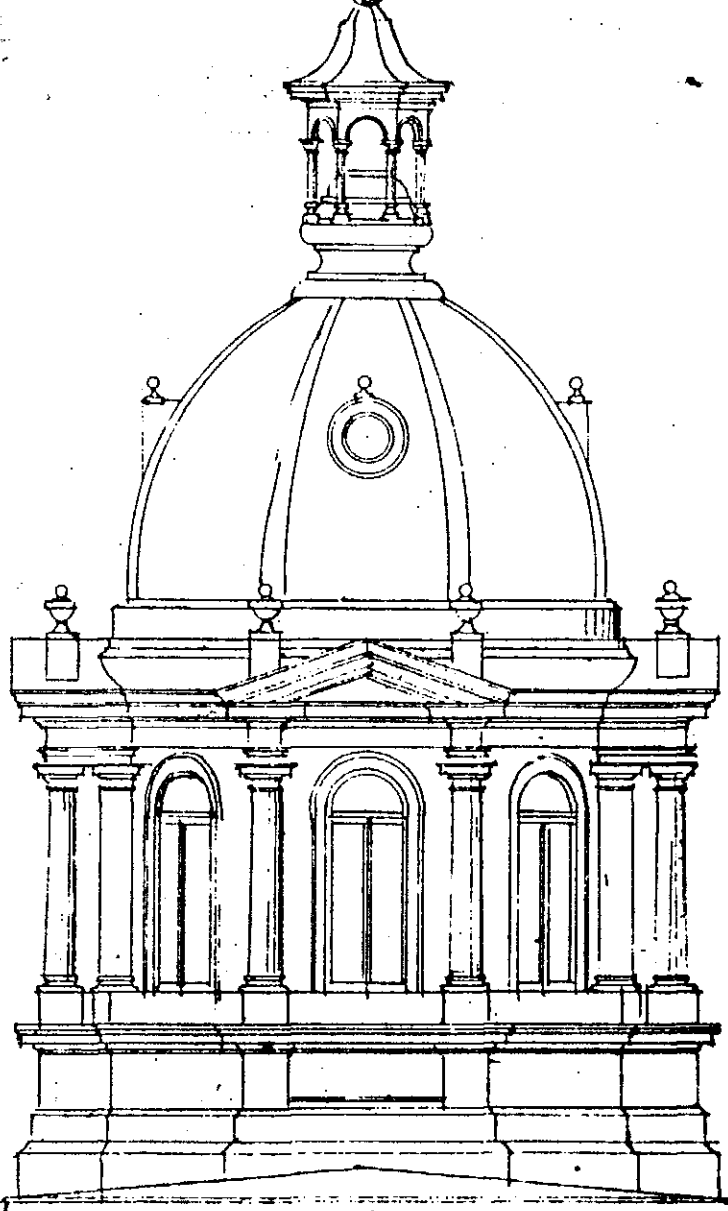


SCALE 1'=20'

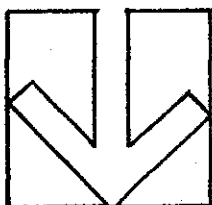
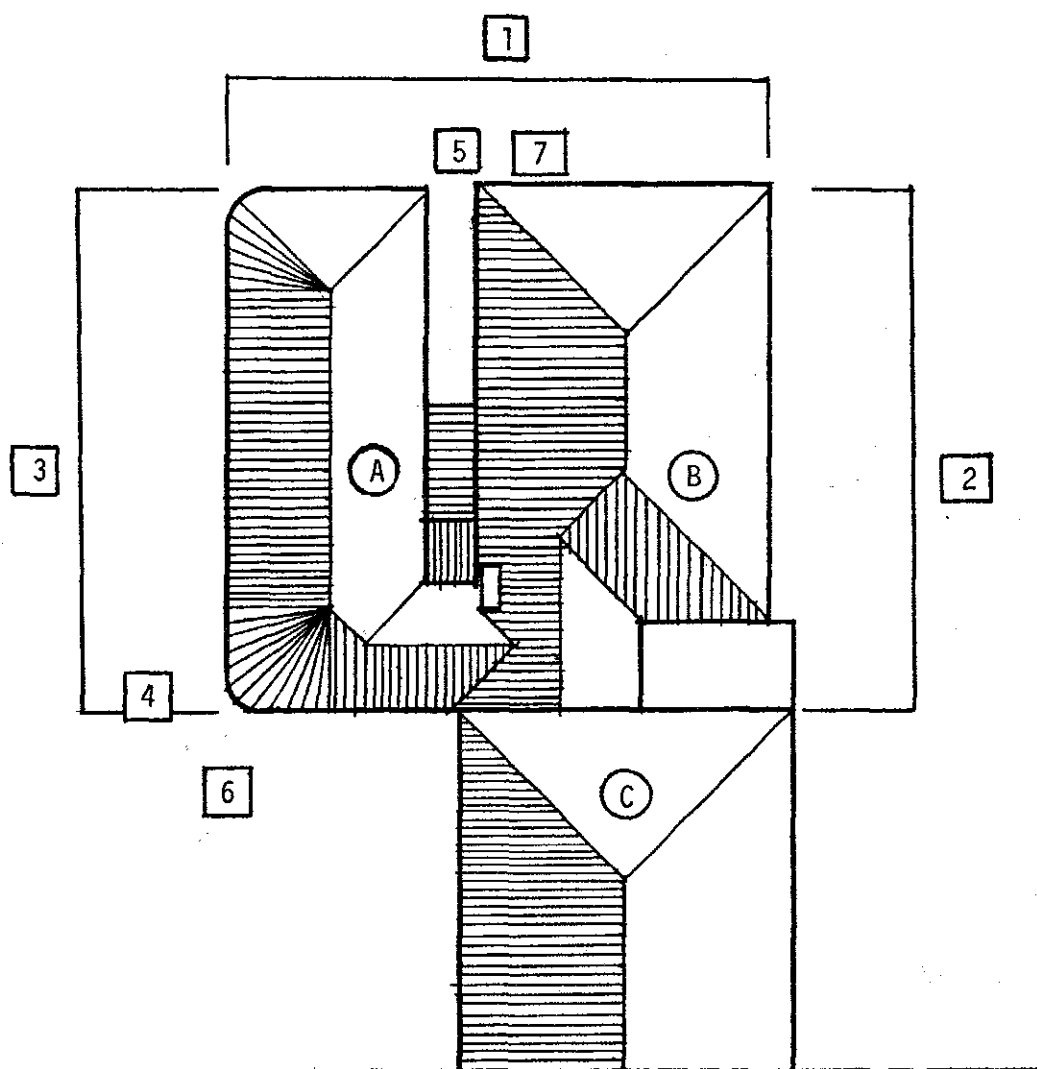


FIRST FLOOR PLAN  
KITCHEN/EMPLOYEE DINING WING  
Southern Ohio Lunatic Asylum  
aka Wilmington Woods Congregate Care Facility

ON SOUTHERN OHIO LUNATIC ASYLUM



- (A) EMPLOYEE/STAFF LUNCHROOM
- (B) KITCHEN
- (C) EXTENDED CORRIDOR



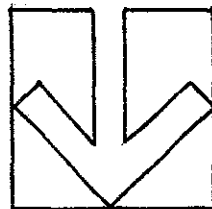
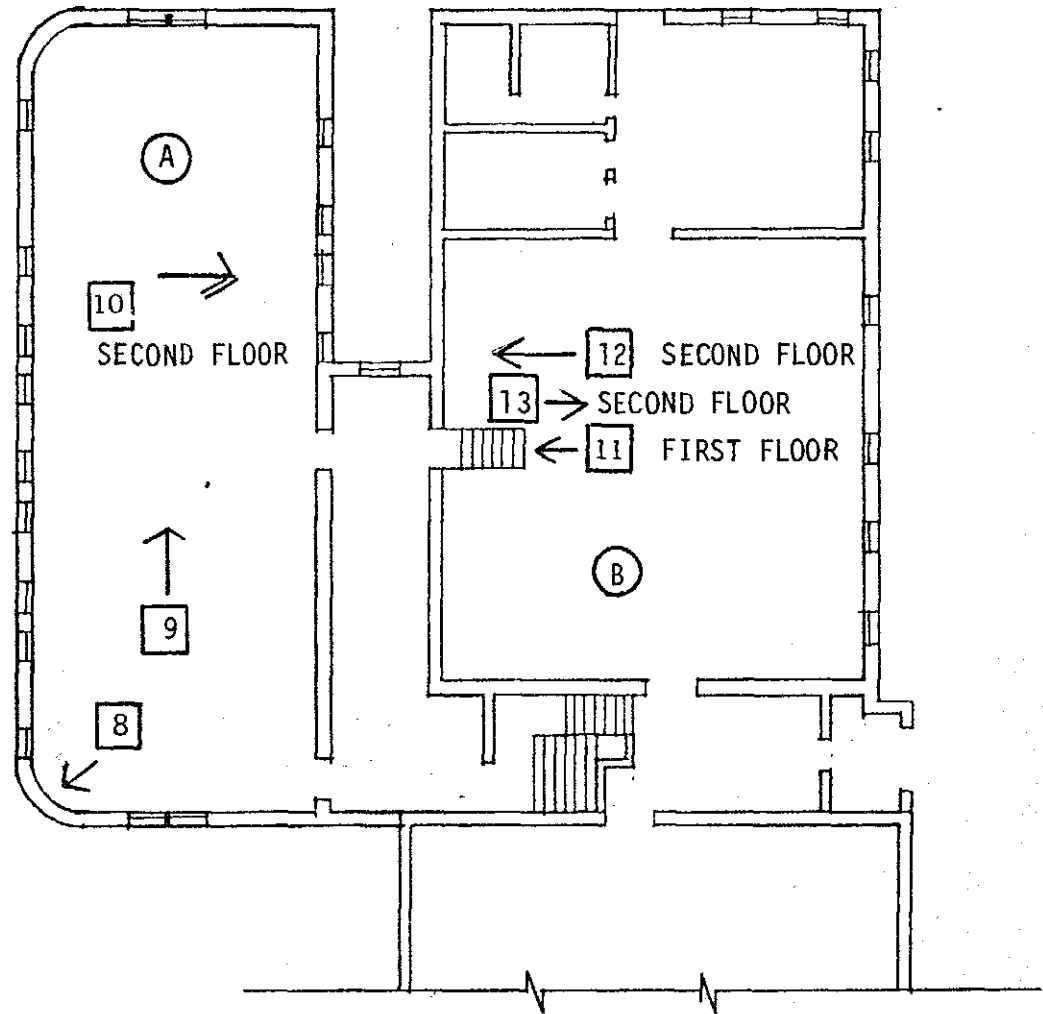
PHOTOGRAPHIC KEY PLAN  
KITCHEN/EMPLOYEE DINING WING  
Southern Ohio Lunatic Asylum  
aka Wilmington Woods Congregate Care Facility

SOUTHERN OHIO LUNATIC ASYLUM (Dayton Mental  
Health Center)

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(A) EMPLOYEE/STAFF LUNCHROOM

(B) KITCHEN



INTERIOR PHOTOGRAPHIC KEY PLAN  
KITCHEN/EMPLOYEE DINING WING  
Southern Ohio Lunatic Asylum  
aka Wilmington Woods Congregate Care Facility